

## Criminal Defense Lawyers' Ethics

THURSDAY, OCTOBER 18, 2007

HOLIDAY INN SELECT - AIRPORT

### TOPICS

- "Building Courtroom Credibility & Professional Responsibility or, "How to Make Noise Like a Lawyer."
- Enforcing the Prosecution's Discovery Obligations under both *Brady v. Maryland* and the RPCs
- Conflicts and Confidentiality
- Multi-defendant Conflict Issues
- The Ethics Doctor is In: Get your questions answered!

### FACULTY:

- Judge John Potter, Jasper Circuit Court, former member, IPDC.
- Judge Teresa Harper, Monroe County Court 8, former member, IPDC Executive Board.
- Kevin McGoff, Bingham McHale, Indianapolis.

### CLE CREDIT:

The Indiana Commission on Legal Education will accredit this seminar for three (3) CLE hours. Please fill in your attorney number below from your Disciplinary Commission good standing card.

### • DATE • PRICE • PLACE •

*Time: 1:45 – 5:00 p.m.; Registration begins at 1:15 p.m.*

Fees: Public defenders \$65 by October 4; after October 4- \$80; at the door - \$95

Criminal defense lawyers \$80 by October 4; after October 4 - \$95; at the door - \$110

Deadline for cancellation refund is **October 8.**

**Place: Holiday Inn Select – Airport  
2501 South High School Road  
Indianapolis, IN 46241  
(317) 244-6861  
Free Parking**

- ☐ The guaranteed room rate is \$93.00 plus 15% state and local tax. You need to reserve your room by Tuesday, September 18.
- ☐ This special room rate is for **Thursday, 10/18 only.**
- ☐ Please inform the reservationist that you are with the Public Defender Council when making your reservation.
- ☐ If you have problems, contact Teresa Campbell, Training Coordinator at (317) 232-2490.
- ☐ **Cut-off date for pre-registration is noon on Wednesday, October 17. No phone registration accepted. Mail or fax only.**

**Please cut here and return bottom portion with payment**

**Thursday, October 18, 2007**

**Name:** \_\_\_\_\_ **Attorney Number:** \_\_\_\_\_

**Business Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Address, City, State, Zip:** \_\_\_\_\_

**Email address:** \_\_\_\_\_

**(If licensed in another state): #** \_\_\_\_\_ **State:** \_\_\_\_\_

**Credit Card VISA OR MC** \_\_\_\_\_ **Expiration Date** \_\_\_\_\_

**Billing Address** \_\_\_\_\_

☐ **I certify that I am a criminal defense attorney.**

\_\_\_\_\_  
*Signature*

**I would like help with the following ethical problem:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Mail this form to:

Indiana Public Defender Council,  
ATTN: REGISTRAR ETHICS  
309 W. Washington, Ste. 401  
Indianapolis, IN 46204-2725  
or Fax to: (317) 232-5524